71. E. A.						PTO/SB/17 (12-04)	
AR Lander the Panethork Reduct			U.S. Patent and	Approved for use Trademark Office;	U.S. DEPART	31/2006. OMB 0651-0032 TMENT OF COMMERCE	
"/ MAI				Complete i		IIII OMA COBITO NUMBER	
Fees pursually the Consolid	dated Appropria	otions Act, 2005 (H.R. 4818).	Application Number	10/666,06			
		MITTAL	Filing Date	09/19/200			
For FY 2005		First Named Invento		Frank Buettner			
101112003		Examiner Name	DAVIS, B				
Applicant claims small entity status. See 37 CFR 1.27			Art Unit	_	1621		
TOTAL AMOUNT OF PAYMENT (\$)450.00			Attorney Docket No.	1/1399			
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
Deposit Account Deposit Account Number: 02-2955 Deposit Account Name: Boehringer Ingelheim Corporation							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION	1011110-2000						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
FILING FEES SEARCH FEES EXAMINATION FEES							
Application Type	<u>S</u> Fee (\$)	mall Entity Fee (\$) Fee (Small Entity \$) Fee (\$) F	Small E ee (\$) Fee (Fees Paid (\$)	
Utility	300	150 500		200 100			
Design	200	100 100		130 65	_		
Plant	200	100 300	-	160 80	_		
Reissue	300	150 500		500 300	_		
Provisional	200	100 0		0 0	_		
2. EXCESS CLAIM FEE	ES		-			Small Entity	
Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Fee (\$) Fee (\$) 50 25							
Each claim over 20 or, to	or Keissues,	each claim over 20 an	id more than in the of	nginai patent han in the orio	vinal natent		
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180							
Total Claims	Extra Claims		Paid (\$) Mu	iltiple Depende			
- 20 or HP = HP = highest number of total		x 50.00 =		<u>Fee (\$)</u> 360.00	Fee Paid (<u>(\$)</u>	
•	Extra Claims	Fee (\$) Fee	Paid (\$)	360.00			
- 3 or HP =		× 200.00 =					
HP = highest number of indep	· · · · · · · · · · · · · · · · · · ·	paid for, ii greater than 3					
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)							
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x 250.00 =							
		/ 50 =	(round up to a whole	: number) X	200.00	_=	
4. OTHER FEE(S)	action #1	20 fee (no small and)	(discount)			Fees Paid (\$)	
		30 fee (no small entity (2) Months	discoulit)			450.00	
Other: Extension Fee for Two (2) Months						700.00	

SUBMITTED BY						
Signature	aldwelf	Registration No. 54,859 (Attorney/Agent)	Telephone 203-798-4816			
Name (Print/Type)	Andrea D. Small		Date March 21, 2005			

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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